PTO/SB/17 (12-04)

Effect Fees pursuant to the Consolid	tive on 12/08/28	ingener 2	005 (H POSE)		Complete	e if Known	
				Application Num	ber 10/045,2	90	
FEE TRA	HINDI	VIII	FAL	Filing Date	October	18, 2001	
For	FY 20	05		First Named Inve	entor Lewis, S	tephen J.	
Applicant claims small			FR 1 27	Examiner Name	Shick C.	Hom	· · · · · · · · · · · · · · · · · · ·
	Unity Glatas:			Art Unit	2666	•	
TOTAL AMOUNT OF PAY	MENT (\$) 180		Attorney Docket	No. 010327-	003600US	
METHOD OF PAYMEN	T (check all	that appl	у)				
Check Credit	Card N	Aoney O	rderNon	e Other (ple	ease identify):		
Deposit Account	Deposit Accou	nt Number:	20-1430	Deposit Accou	int Name: Townser	nd and Townse	nd and Crew LLP
For the above-ide	ntified deposi	t account,	the Director is h	ereby authorized t	o: (check all that a	apply)	
	s) indicated be				e fee(s) indicated	below, except	for the filing fee
under 37 CF WARNING: Information on th	Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038						
	DCU AND	EVAMIN	ATION EEES			<u>. </u>	
1: BASIC FILING, SEA Application Type	FILING	FEES	SEA	ARCH FEES Small Entity (\$) Fee (\$)	EXAMINATION Small Fee (\$) Fee	Entity	Fees Paid (\$)
Utility	300	150	. 500	250	200 10	0	
Design	200	100	100		130 6	5	
Plant	200	100	300			0	
Reissue	300	150	500		600 30	•	
Provisional	200	100		0 0		0	
2. EXCESS CLAIM FEI Fee Description Each claim over 20 or, and a second claim Multiple dependent claim Multiple dependent claim Total Claims -20 or HP HP = highest number of total claims	for Reissues over 3 or, f ms Extra Clain aims paid for, if Extra Clain	ns greater than	res, each indep ree (\$)		ore than in the o		360 180
3 or HP = X = HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) - 100 =							
Other: Submission of Information Disclosure Stmt 180							
SUBMITTED BY							
Signature	5			Registration No. (Attorney/Agent)	48,602	Telephone	415-576-0200
Name (Print/Type) Brian	N. Young		Ž.			Date Dece	mber ((), 2005

DEC 0 9 2005

TRANSMIT AL THANKS

		F10/3B/21 (03-04)
Application Number	10/045,290	
Filing Date	October 18, 2001	•
First Named Inventor	Lewis, Stephen J.	
Art Unit	2666	
Examiner Name	Shick C. Hom	
Attorney Docket Number	010327-003600US	

(to be used for all correspondence after initial filing)

Total Number	of Pages in This	Submission

	ENCLOSURES (Check all that apply)					
	Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s) Licensing-related Pape Petition Petition to Convert to a Provisional Application Power of Attorney, Rev Change of Corresponded Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Tabl	ocation ence Address e on CD	Af Af Of Ap Of (A) Ap Of (opeal Con Appeals opeal Con ppeal Noti roprietary latus Lette ther Enckelow): ostcard; r	ance Communication to TC munication to Board and Interferences numunication to TC ce, Brief, Reply Brief) Information er osure(s) (please identify no references
	CICNA	TUDE OF ARRIVANT A	TTODNEY (OD ACEN	<u> </u>	
Firm N	Firm Name Townsend and Townsend and Crew LLP					
Signat	Signature					
Printed name Brian N. Young						
Date	December (), 2005 Reg. No. 48,602					
CERTIFICATE OF TRANSMISSION/MAILING						
	by certify that this correspondence is bope addressed to: Commissioner for Po					
Signa	Signature U) (
Typed	or printed name Mark T. Davi	s			Date	December (그), 2005

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Attorney Docket No.: 010327-003600US

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

TOWNSEND and TOWNSEND and CREW LLP

Mark T. Davis

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Stephen Lewis, et al.

Application No.: 10/045,290

Filed: October 18, 2001

For: METHOD AND APPARATUS FOR INSERTING EMPTY MEMORY CELLS INTO A DATA FLOW OF NETWORK CONNECTIONS OF A COMPUTER

NETWORK

Examiner: Shick C. Hom

Art Unit: 2666

SUPPLEMENTAL INFORMATION **DISCLOSURE STATEMENT UNDER 37**

CFR §1.97 and §1.98

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A are being called to the attention of the Examiner. Copies of the references [in compliance with the requirements of 1287 OG 163] are not enclosed.

It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

12/12/2005 MAHMED1 00000047 201430 10045290

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180.00 DA

Stephen Lewis, et al.

Application No.: 10/045,290

Page 2

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

This IDS is being filed before the mailing date of the final Office Action or Notice of Allowance.

Please charge the IDS fee of \$180 to Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

Brian N. Young Reg. No. 48,602

TOWNSEND and TOWNSEND and CREW LLP Two Embarcadero Center, Eighth Floor San Francisco, California 94111-3834

Tel: 415-576-0200 Fax: 415-576-0300

BNY:mtd

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Substitute for form 1449A&B/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet

Complete if Known				
Application Number 10/045,290				
Filing Date	October 18, 2001			
First Named Inventor	Lewis, Stephen J.			
Art Unit	2666			
Examiner Name	Shick C. Hom			
Attorney Docket Number	010327-003600US			

U.S. PATENT DOCUMENTS+					
		Document Number			
Examiner Initials*	Cite No.¹	Number Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	AA	US 5,602,841	02-1997	Lebizay et al.	
	AB	US 6,084,869	07-2000	Fishman et al.	
	AC	US 2002/0176424	11-2002	Knight et al.	
	AD	US 2002/0176430	11-2002	Sangha et al.	
	AE	US 6,532,234	03-2003	Yoshikawa et al.	
	ΑF	US 6,785,236	08-2004	Lo et al.	
	AG	US 2005/0175014	08-2005	Patrick	
	AH	US 10/035,791	•	Cole et al.	
	Al	US 10/045,187		Lowpensky	

Examiner	Date	
Signature	Considered	

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Applicant's unique citation designation number (optional). Applicant is to place a check mark here if English language Translation is attached.